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CONFIRMATION NO. 7326

|   |   |                               |   |   |
|---|---|-------------------------------|---|---|
| <b>SERIAL NUMBER</b><br>09/065,330  | <b>FILING OR 371(c) DATE</b><br>04/23/1998<br><b>RULE</b>   | <b>CLASS</b><br>536           | <b>GROUP ART UNIT</b><br>1647   | <b>ATTORNEY DOCKET NO.</b><br>2500.097US2 |
| <b>APPLICANTS</b><br>AMEAE M. WALKER, RIVERSIDE, CA;  |   |                               |   |   |
| <b>** CONTINUING DATA *****</b><br>This application is a CIP of PCT/US97/01435 01/30/1997 *<br>which is a CIP of 08/594,809 01/31/1996 ABN<br>(*)Data provided by applicant is not consistent with PTO records.   |   |                               |   |   |
| <b>** FOREIGN APPLICATIONS *****</b>  |   |                               |   |   |
| <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b><br><b>** 05/18/1998</b>  |   |                               |   |   |
| Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no<br>35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after<br>met Allowance<br>Verified and Acknowledged _____<br>Examiner's Signature Initials |   | <b>STATE OR COUNTRY</b><br>CA | <b>SHEETS DRAWING</b><br>2  | <b>TOTAL CLAIMS</b><br>10                 |
|   |   |                               |   | <b>INDEPENDENT CLAIMS</b><br>3            |
| <b>ADDRESS</b><br>25213   |   |                               |   |   |
| <b>TITLE</b><br>PROLACTIN ANTAGONISTS AND USES THEREOF  |   |                               |   |   |
| <b>FILING FEE RECEIVED</b><br>895   | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                               | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |   |